

CITY OF SHORELINE  
17500 Midvale Avenue N.  
Shoreline, WA  
98133-4905 (206)  
801-2578

**RESIDENTIAL SEWER USE CERTIFICATION**

Property Location:		
Property Legal Description:		
Property Owner's Name:		
Owner's Mailing Address: _____		
Phone #: _____		
Date of Connection or Use Change:		
<b><i>Please check appropriate box:</i></b>		
<input type="checkbox"/> <i>Residential Customer</i> <input type="checkbox"/> <i>Equivalent (RCE)</i>		
Single Family/0 Lot Line	<input type="checkbox"/>	1.0
Duplex (0.8 RCE per unit)	<input type="checkbox"/>	1.6
3-Plex (0.8 RCE per unit)	<input type="checkbox"/>	2.4
4-Plex (0.8 RCE per unit)	<input type="checkbox"/>	3.2
5 or more (0.64 RCE per unit) No. Of Units _____ x 0.64	<input type="checkbox"/> ➔	
Mobile Home Space (1.0 RCE per space) No. Of Units _____ x 1.0	<input type="checkbox"/> ➔	
<p><b>I certify that the information provided is correct. I understand that the “General Facilities Charge” levied will be based on this information and any deviation will require resubmission of corrected information for determination of a revised charge.</b></p> <p>Owner Signature _____</p> <p>Date _____</p> <p style="text-align: center;">-or-</p> <p>Authorized Agent _____ Authorization _____</p> <p style="text-align: center;"><i>print name</i>                      <i>Signature</i></p>		

Swr\_use.res

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